STATEMENT OF

.R

FEC FORM 1	ORGANIZATION				FEC MAIL CENTE	
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)		mple:If typing, type r the lines.	12FE4M5	
DELAWA	RE DE	MOCRATIC L	.EAC	DERSHIP FE	DERAI	COMMITTEE
ADDRESS (number and street) (Check if address is changed)		P. O. BOX 16194				
		PLANTATION	1		FL	33318
			CITY		STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES (Check if address is changed)		SS (Please provide only one e-mail address) [DemocraticLeadershipCommittees@gmail.com]				
COMMITTEE'S WEE	B PAGE ADD	DRESS (URL)				
(Check if address is changed)						
2. DATE 10)" ′ 1 7	" ′ <u>2</u> 012				
3. FEC IDENTIFIC	CATION NU	IMBER C				
4. IS THIS STATE	MENT 🔀	NEW (N) OR	L	AMENDED (A)		
I certify that I have	examined th	is Statement and to the bes		-	is true, correct	and complete.
Type or Print Name	of Treasurer	ALEXANDE	K CI	LINTON	······································	
Signature of Treasur	er	Hexander C	luit	<u></u>	Date 10	17° ′ 20′12 `
NOTE: Submission of		ous, or incontrilete information	•			the penalties of 2 U.S.C. §437g.
Office Use Only				For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)